HARNETT UNTY HEALTH DEPARTMENT

10 19069

- 5-4497

IMPROVEMENT PERMIT

Be it ordained by the Harnett County Board of Health as follows: Section III, Item B. "No Person shall begin construction of any building at which a septic tank system is to be used for disposal of sewage without first obtaining a written permit from the Harnett County Health Department." New Installation Septic Tank in Grove Name: (owner) Property Location: SR#_ Repairs Nitrification Line ___ Lot # 57 Subdivision Tax ID #___ ____ Ouadrant # ____ Number of Bedrooms Proposed: 3 (27×76) Lot Size: 155 Ac Basement with Plumbing: Garage: Water Supply: ☐ Well Public ☐ Community Distance From Well: Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Other - Cup to Convent Type of system: ☐ Conventional Size of tank: Septic Tank: 1000 Pump Tank: (gallons _ gallons Subsurface exact length width of depth of of each ditch ft. ditches ft. ditches depth of Drainage Field ditches French Drain Required: _____ Linear feet This permit is subject to revocation if site Signed: _ plans or intended use change. 39 Environmental Health Specialist 123 DOVE 28 173 10 Concl Drive 15 JR 1114 Meet Dasik 18" Pitch Orghi B not Dave Dappak on septer System

F IETT COUNTY HEALTH DEPARTME AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department, Improvement Permit # 19069. This authorization shall be valid for a period not to exceed five (5) years from the date of issuance. This authorization will be invalid if ownership, site plans, or intended use change.			
Pine Grove Dev. Cong		498 - 2254 Telephone #	
Name		Telephone #	
2			
Address			
1114			
Property Location SR#	57	Road Nar	
FACING 5 Ponds	Lot #	ろ(えつxつん) # Bedrooms Proposed	. 55 Ac
Subdivision	Lot #	# Bedrooms Proposed	Lot size
TYPE OF SYSTEM			
New Installation [] Repair [Septic Tank Nitrification Lines			
1			
New Installation [] Repair [Septic Tank [Nitrification Lines [] Conventional Other			
[] Basement [] With Plumbing [] Without Plumbing			
Water Supply: [] Well [Public - Minimum Well Setback: Ft.			
NITRIFICATION FIELD SPECIFICATIONS			
Number of fields # of lines per field Length of lines Ft.			
Width of ditches ft. Depth of ditches inches			
French Drain: Linear feet required Depth of gravel			
No wastewater system shall be covered or placed into use by any person until an inspection by the Harnett County Health Department has determined that the system has been installed according to the conditions of the Improvement Permit and that a valid Operations Permit has been issued.			
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Date

Signature of Authorized Agent for Harnett County